Canadian Hospital



A Monthly Journal for Hospital Executives

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In This Issue-

Planning the Large General Hospital Problems of a New Hospital News of Hospitals and Staffs

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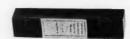
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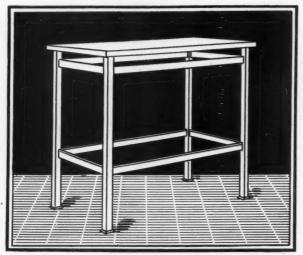
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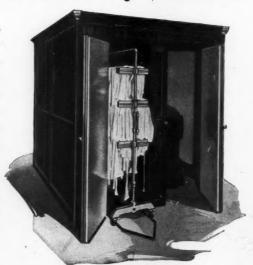
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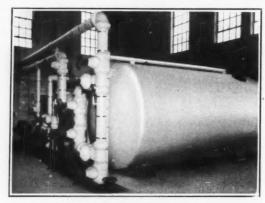
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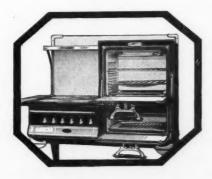


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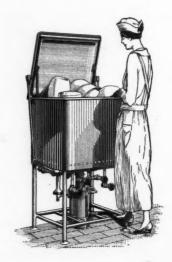


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It would be impractical to make a utensil sterilizer from a single casting. We have done the next best thing, however, and have cast the base from solid virgin bronze. This is sloped for easy drainage. It has rounded corners and wide lips to which the tank walls are riveted and sweated. This is as near fool proof construction as is possible. The new mechanical pump raises tray and cover simultaneously by several strokes of the pedal. It operates easily and obviates hydraulic valve mechanism.





For any re-equipment, it will pay you to investigate these two new outfits. Also, other Castle sterilizing equipment has similar points of superiority that make it worth the price.

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No. 4

Officials of Canadian Hospital and Nurses' Associations

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President, Colonel Gartshore, London.

Secretary, Dr. F. W. Routley, Ontario Division, Canadian Red Cross, Toronto.

Saskatchewan Hospital Association.

President, G. E. Patterson, Regina. Secretary, T. T. Murray, Saskatoon.

Planning a Reciprocal Arrangement

Negotiations for a reciprocal arrangement for the care of indigent patients in hospitals are proceeding between the governments of Manitoba, Ontario and Saskatchewan.

Under present conditions a certain proportion of the patients, unable to pay their way, admitted to hospitals in Manitoba, come from the neighboring provinces while some residents of Manitoba from time to time are admitted to hospitals in either one or the other provinces.

Hon. D. L. McLeod, municipal commissioner of Manitoba, has been in communication with authorities in Saskatchewan and Ontario, seeking to make

some arrangements whereby the hospitals will not have to bear the major portion of this burden. Indigent patients admitted to hospitals and having no abode within the province where the hospital is situated are a serious drag on the institution, as Mr. McLeod stated. The hospital receives the government grant of 50 cents per day, but as the patient is not chargeable to any municipality within the province, the hospital must absorb the balance of the daily charge of \$1.75. Plans are now being made for a conference between Manitoba hospital officials and an official of the provincial government, with representatives of the other provinces interested.

The Vancouver Island Hospitals

In a full page article, liberally illustrated with photographic reproductions, the Victoria Daily Times of February 21st dealt extensively with the hospital situation of Vancouver Island. Statistics of the fourteen public hospitals on the Island were given in detail. There is a strong movement in progress at the present time in connection with hospital extension work, and for the second year in succession the B. C. Hospitals' Association will hold its annual convention on the Island. It is hoped to stimulate local interest in hospital matters generally and more especially in regard to building funds. In the Northern end of the Island many casualty cases result in the forest industries and an effort is being made to provide increased hospital accommodation there.

The hospitals throughout the Island are in a very satisfactory position financially, but several are

planning improvements and additions.

Aim to Keep Nurses in Canada

Dr. Walter Bapty asked at the February meeting of the directors of the Jubilee Hospital, Victoria, if it were not possible for the directors to get into touch with leading Canadian Hospitals and establish a standard for nursing certificates acceptable through the Dominion.

He was speaking in connection with a suggestion before the meeting to engage a stenographer, the bulk of whose work would be to keep the minute records required by the New York authorities for nurses. If graduated in a training school under its aegis these nurses would be acceptable anywhere in the State of New York. It was explained that all other States accepted the New York standard and a nurse gaining such a certificate had a free field for employment through the United States.

The Jubilee Hospital is a subscribing institution, and most detailed records of the work of each nurse must now be kept.

Dr. E. Campbell said the effect was to encourage Canadian nurses to go to the United States as has been the case with the young men.

A. Stewart endorsed this sentiment.

Charles Williams said the result was to turn the hospital into a training school. He doubted the expediency of the matter.

No action was taken although Dr. E. M. Pearse, the medical superintendent, said more stenographic aid was imperative owing to the increase of clerical work.

Inaugurating Dental Service

The first completely organized dental service for the public in Canada is being opened at the Toronto Western Hospital under the direction of the Provincial Dental Department, which was organized by the Minister of Health, Hon. Dr. Forbes Godfrey, and to which Dr. Fred H. Conboy was recently appointed director. A dental clinic will be placed at the services of the public, under Government auspices, and the new department will be affiliated with the Royal College of Dental Surgeons. Dr. Harold K. Box will be at the head of the department of Dental Surgery and Dental Pathology, and he will have as his associates Drs. W. S. Madill and H. G. Robb. A dental surgeon will be selected from the graduating class of the college each year and will be granted an interneship by the hospital for twelve months, where he will combine active and research work.

Scandinavian Hospitals Give Excellent Service

"They all eat to much and drink too much, and this place is full of hospitals," was the opinion of a waiter in a Copenhagen restaurant, whom Dr. J. G. Fitzgerald, Professor of Hygiene and Director of the Connaught Laboratories, found to be a mine of information on Danish affairs, in his recent trip to the three Scandinavian countries, described by him in the third of the University Alumni lectures given in Convocation Hall, Toronto. Further investigation of the country by Dr. Fitzgerald proved that the informative waiter was not far wrong—but, if there were many hospitals, these were among the best in the world.

"The care, welfare and happiness of the patients in the Danish hospitals is of a consideration more than the scientific interest in the maladies themselves," he declared. "The nursing is very fine, and the hospitals are so arranged that patients have an outlook upon open spaces filled with gardens, trees and flowers. Separate buildings have been arranged for non-drug treatments—lights, baths, massage, mechanotherapy and hydro-therapy—and I discovered that the diphtheria rate in Copenhagen is lower than in any other city in the world.

"Denmark was one of the first countries in the world to adopt the manufacture of insulin on a large scale after Dr. Banting's and Dr. Best's world-famous discovery, and one of the Danish scientists was sent to the University of Toronto to learn how it was made," he continued. "There are some 3,000 doctors, who are highly organized, the majority of them belonging to a national medical society and to a guild which unifies medical practice and deals with problems between the profession and the public.

"Public health work is less highly organized than in the United Kingdom or in Ontario, but the infant mortality rate is one of the lowest in the world. The Director of Public Health pointed out to me that this was due mainly to breast feeding, supervision of food and general education of the people," he said.

A new position—If you seek a new hospital position advertise in the classified columns of The Canadian Hospital. A box number may be used if desired and replies will be forwarded. See page 37.

Two Frontier Hospitals Opened in North by C. N. R.

The twelfth frontier hospital of the Ontario District of the Red Cross Association was opened in Horne Payne on Feb. 25th, by C. G. Bowker, general manager of the central region, Canadian National Railways, and Dr. F. W. Routley, medical director of the association. Although a heavy snow-storm swept the district during the day, the event was a picturesque one and when the visiting officials of the railway and the Red Cross arrived at the hospital more than two hundred school children formed two lines, through which they walked to the building. An added touch of the atmospheric North was given by a number of dog teams which flanked the entrance.

The opening of the Horne Payne Hospital marks the second to be put into operation by the Red Cross in the Northern outposts within two days. On the day before the eleventh frontier hospital at Nakina was formally opened, and the one at Horne Payne, like its sister one in Nakina, was erected by the Canadian National Railways and turned over to the Red Cross for operation at the nominal sum of one dollar per year. Mr. Bowker, in giving the building to the Red Cross, pointed out that it would be beyond the Canadian National resources to assist hospitals throughout its territory, but in the cases of Nakina and Horne Payne exceptions had been made, as they were towns built by the C.N.R. employees and that there were no other available hospitals within 320 miles. It was a duty which the company owed to its employees to afford them adequate protection against serious illness or accident.

With the opening of the two new hospitals, another link in the chain of frontier hospitals has been forged by the Red Cross which will give adequate protection to the communities served. The new Horne Payne Hospital is fully equipped to meet almost every emergency. Accommodation for approximately 15 people at once is given by the three wards, and in addition there is an up-to-date operating room. The building itself is of an attractive design of wood, with a cement foundation, and will serve a district of approximately 6,000 people.

In the evening a banquet was given the visiting officers of the Canadian National and the Red Cross by the citizens. Mr. Bowker in a brief address paid a high tribute to the peace-time work of the Red Cross and complimented the residents of Horne Payne upon the interest they showed in the new hospital and upon the able way in which they co-operated with the Red Cross in furnishing it. Other addresses were given by Dr. F. W. Routley, W. H. Alderson, vice-president of the association; W. R. Devenish, general superintendent of the Northern Ontario district; G. W. Matthews, of Toronto, and Dr. Dollar, district medical officer of the railways and medical officer in charge of the hospital. Superintendent J. J. Napier presided.

Expect to Raise Large Sums

Application will be made to the Legislature by the City of Toronto for legislation to enable the council to pass by-laws for the issue of debentures to raise the following sums: Hospital for Incurables, \$125,000; East End Site, \$52,000; and Measles Hospital, \$150,000.

Planning a General Hospital

By Harold J. Smith of Stevens & Lee, Architects, Toronto

The first problem in the development of an institution of this nature that presents itself to the Board or Committee is to determine the size and character that is required for the particular locality in which it is to operate. Too frequently is an architect asked to design a hospital for a somewhat indefinite number of beds or else for a bed capacity that is not based on an accurate survey of the district which is to be served. Very often the size is based on that of another institution which appeals to the committee in charge or else a sum of money available for the work is divided by a price per bed and the size so determined. This latter method is most misleading as the cost might vary from \$3,500 to well over \$5,000 per bed.

The correct procedure is to prepare a survey of the district to be served, taking into consideration the following: population, character, and annual increase of the same; present hospital accommodation; general occupations, health and hazards; housing accommodation; sickness rate in the community; any special characteristics or customs of people and other data of similar nature that affect the life of the community.

Whilst the foregoing information is not necessarily complete and does not indicate the procedure to be adopted in determining the number of departments or their size that are to be provided, it does however, indicate the character of the information required, the method of using it being somewhat self-evident. Space will not permit of a more detailed description.

After this preliminary survey and determining the beds required and the departments to be provided the next step is the selection of site. At this point it would be advisable to suggest that if the architect has not been appointed he should be before anything further is done. This man or firm should be one who has had considerable experience in this class of work so as to be in a position to advise the committee on all details. It will be readily seen that an architect who has planned a number of such institutions can be of great service to any committee, the average member of which never develops more than one hospital in his life.

The site is a most important part of the institu-



View of a Typica! Ward

tion and should be carefully considered from every point. The type and character of the institution has to be considered and whether or not it is to be used by medical students. These items will, to some extent, determine the location. The site itself should always be of ample size to allow for expansion over any reasonable period of time. It should be as economical as possible so as to permit of as much money as can be secured being spent on the actual buildings for the patients.

It should not be bounded by either electric or steam railways, factories or anything that is either noisy or smoky. A pleasant outlook and one of distance on all sides, except the north where it is not so imperative, is desirable. The location should be within convenient walking distance for the majority of people from a car line and should be surrounded with good roads. It should be well drained and if it has about a 10 per cent. slope to the North, so much the better.

After the site comes the general plan or orientation of the buildings. More and more are medical scientists realizing the healing powers of sun and air so that the ideal hospital would be one in which every patient's room received sun throughout every day of the year. This, however, is not practicable, but nearly every room can have sun for at least a portion of every day. This should therefore be very carefully studied at the very beginning.

CHARACTER OF BUILDINGS

The character of the buildings is next and while many large European hospitals and some American have been developed on the unit basis, i.e.: separate buildings for each department, it has been proven many times that economy of construction and maintenance is achieved by the use of a multi-storied building. The wards and patients' rooms can be readily and advisedly accommodated in one building up to a capacity of 500 or 600 beds. One exception would be for contagious diseases other than those arising in hospital. Separate buildings for Nurses; servants; dining rooms, kitchens and stores; power house and laundry are advisable in nearly all cases.

With all the previously mentioned items settled the next one is the wards and patients' rooms. The long narrow ward which is found in many of our older institutions is almost obsolete to-day for which we should be very thankful. The ideal arrangement of patients' beds would be single rooms with a few containing two or three beds. This, however, is not, for financial reasons, generally practicable. The general hospital is built to serve the needs of all classes in the community and as single rooms always cost more to build and maintain than large wards it is logical to provide the proportion of wards to rooms to suit the financial resourses of the population to be served.

The old long ward of twenty or more beds was not conducive to the best results for the patient. It provided practically no privacy and in most cases necessitated considerable walking for the nurses. It does not lend itself readily to the development of any other department or type of rooms above it. Neither is it very suitable for those below unless the building is widened out in which case the walls of the

long ward make for awkward construction details in the carrying of them.

It has been the practice in our own office to always advise the more square type of ward containing either eight or sixteen beds. This is placed across the building the outside dimensions of which may vary from forty-three to forty-five feet. The corridor will terminate at this ward and behind it on either side of the former will be four or six bed wards with at least one single room for each twentyfive bed or portion thereof. The sixteen bed ward should be about forty feet square with a short low screen (not over 7' 0" high) across the middle of it on either side of the longitudinal axis of the building. This divides the ward into four more or less private sections. Again, a ward of this width provides suitable dimensions for private and semi-private rocms on the upper floors and for special departments below. The four and six bed wards might have low plaster or glazed screens between the beds to further the privacy. Each ward should be equipped with a suitable basin and each bed provided with an electric receptacle for portable light or combination bracket light with integral receptacle and a nurse call button with indicating lamp.

Private rooms are becoming more and more in demand and should have the same electrical equipment as the ward bed plus a telephone plug and possibly a receptacle for radio head phones. Each room should also have a small clothes closet and a lavatory. In addition there should be a few rooms with private bath rooms or a bathroom between two patients' rooms, also a few private toilets.

General bath and toilet accommodation should be about the same for all classes, i. e.: one of the former for about each twenty patients or less of each sex and of the latter about one to eleven or twelve.

ARRANGEMENT OF DEPENDENCIES

Ward dependencies, such as serveries, toilets, dressing rooms, utility or sink, linen and flower rooms etc., should be so arranged as to reduce to a minimum the amount of walking that will be necessary for the nurses. They should also be placed, as far as possible, in the portions of the building receiving the least sun, and should be arranged so as to transmit the least possible noise to the patients' room. The most noisy rooms should have their ceilings covered with some sound absorbing material of which there are several on the market. It is also advisable to treat the corridor ceilings in a similar manner.

Children's wards are generally treated in a similar manner to those for adults with a few exceptions. The floor area is of course less, for adults one hundred square feet per bed should be allowed whereas seventy square feet is ample for children. These areas do not apply to private rooms which of necessity must be somewhat larger. For adults a width of nine feet six inches is almost a minimum whereas eight feet will do for children. A separate section of the hospital should be set aside for children owing to the different conditions governing their care. One unit in this department that is most essential is the detention ward which should be subdivided into small cubicles with glazed screens. Owing to the uncertainty of some children's diseases and the possibility of something else developing of which there were no symptoms when admitted, all cases should

enter this ward until proper diagnosis can be made and all danger of an unknown illness arriving, has passed. One more room that is most necessary in this department is the play room which should be tastefully arranged for the purpose.

SUBDIVISION OF PLAN

Solaria and airing balconies are essentials for all ward or patients' floors. The former should be arranged so that the maximum of sun and air may be obtained in fine weather with proper protection from the weather when it is inclement. The balconies are sometimes placed on the north so as to provide a cool airy spot during the hot summer months.

An Isolation department is an essential part of the hospital and is for taking care of cases arising in the Institution itself. It should be generally equipped in accordance with the principles governing the care of contagious diseases.

The maternity department should be well isolated from all others with labour and delivery rooms and creche well isolated from all beds but readily accessible to them. This department must not be in proximity to the operating suite. Creche accommodation should be almost equal in number to the patients in the department and should be provided with a proper bath room. The delivery department should have sterilizing, orderlies', nurses' and doctors' rooms, although not essential. If the department is large a small isolation section with a septic operating room and creche may be advisable. Certainly some isolation rooms with bath are essential. Another requirement is a properly isolated and well heated room for premature babies.

The operating department is best located on the top floor and if possible one without any other departments or patients' room located on it. The number of rooms in the department will depend somewhat on the size of the surgical staff and not entirely on the patients' accommodated. The following are, however, essential: Operating, anesthetic, sterilizing and work rooms, supply closet, surgeons' coat room and toilet and surgeons' wash up. To these may be added orderlies', internes' instrument, recovery, nurses' locker and plaster rooms and laboratory.

Operating rooms should be located on the North side although if this is impossible then on the West.

(Continued on page 15)



An Attractive Nursery

New Method Successful in Asphyxiation Cases

Is the pulmotor for resuscitation of patients unconscious from gas poisoning now a thing of the past?

A combination of carbon dioxide and oxygen used at the Western hospital for some time now has been working almost magically in saving lives of asphyxiated persons without half the risk of pneumonia and bronchial troubles involved in the use of the pulmotor. Much easier also to take around and handle is the new remedy, which consists only of two cylinders and some rubber tubing.

Speedy resuscitation of patients unconscious from alcohol and prompt relief of the milder symptoms of intoxication are reported from the same treatment in New York.

"We have never used it for alcoholics here," said Dr. G. H. Agnew, physician to the Western hospital, who has had charge of these experiments. "This is principally because we find most of the symptoms of our alcoholic patients in our wards are principally due to the poor quality of the alcohol and of fusel oil, and we use other methods for such poisons. In these cases there are substances which poison the body as well as depress the respiration."

"But for use in asphyxiation cases," said Dr. Agnew, "I feel that we get far faster and better results than with the pulmotor."

"I feel that if we were to use this method in emergency cases where people are asphyxiated," said Dr. Agnew, "that we should get much better results than by the old methods. A pulmotor, especially when put on hastily, is apt to cause a fatal pneumonia."

The only bar to the use of the gases at present is their expensiveness, but this would be largely obviated by their wider use.

Planning of a General Hospital

(Continued from page 14)

The size should be not less than 250 square feet with 325 square feet for a good commodious room. window should be of steel having an area of from sixty-five to eighty-five square feet. Recent experience has proven that it is not essential to extend the window, in the form of a skylight, back into the roof except for a large clinical amphitheatre containing accommodation for fifty or more students. A very good system of artificial lighting is provided with four two hundred watt outlets at the corners of a square or six or seven feet to the side and just over the table. The anesthetic room should be close to the operating room and if possible lead directly into it. work room, wash up and sterilizing room should also be near the operating room. In addition to the general sterilizing apparatus a still may be used for providing sterile water. The still should be located in a pent house or other room above the operating floor and the water piped to the various necessary outlets through tin lined pipe. This water may also be cooled and used as drinking water on the ward floors and piped to other rooms in the out-patient or accident departments.

Editors note: The second and last part of this article will be published in the May issue.

Real Economy Effected by Using

Green Soap

(Hartz)

Because It Is Absolutely Pure

Green Soap "Hartz" is prepared from high grade vegetable oils of an edible quality, saponified by Pure Potassium Hydroxide and contains no filler.

It Is All Pure Soap

Neutralized to contain no excess of free alkali and therefore non-irritating. Readily soluble in water. An efficient cleanser with splendid lathering qualities.

Contracts for 1925 requirements being offered at attractive prices.

Manufactured by

The J. F. Hartz Co., Limited

Pharmaceutical Manufacturers

Toronto

Montreal

STERILIZATION



STERLING Gloves Excel

The real test of Surgeons' Gloves is in the number of sterilizations they will give in actual service.

Many comparisons in actual use have merited for STERL-ING Gloves their enviable reputation and accounts for

their exclusive use in most hospitals in Canada. They are by far the most economical in the long run.

The STERLING trade mark on rubber goods guarantees all that the name implies.

Write for illustrated circular containing helpful data

Sterling Rubber Company Timited
GUELPH - CANADA

Largest Specialists in SEAMLESS Rubber Gloves in the British Empire.

A Saving in Time, Material and Money

CELLUCOTTON

-REG. U.S. PAT. OFF.-

What we say in this advertisement has been said to us by CELLUCOTTON users and is in effect-a composite testimonial of thousands of hospitals in which Cellucotton is an accepted absorbent.

Your interest should be based on other peoples opinions, but only to the extent that you may be helped to improve your own surgical dressings practice.

Exclusive Selling Agents:

LEWIS MANUFACTURING CO. WALPOLE, MASS.

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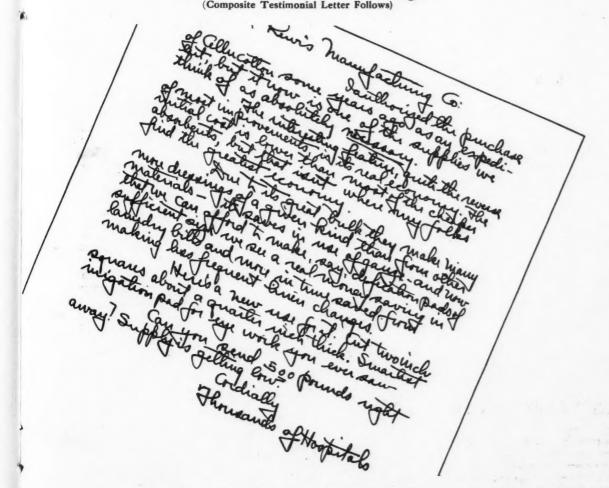
"A Lasting Contribution To



"The world's most remarkable absorbent material."

Samples — real ones — for the asking.

Its Economy



Better Surgical Dressings"



Comfortable Normal Feet

Consider the healthy, normal foot. It is a finely arched structure of twenty-six small bones held in place by strong supple muscles. Not a toe out of line and not a twinge of discomfort. Such a foot is like a flexible, shock-absorbing spring that Nature placed under the body for the same reason that man places strong springs under a motor car.

Cantilever Shoe

Nurses especially should take good care of their feet and be very particular in the choice of their shoes. Otherwise, long hours of duty are likely to have a disastrous effect. Shoe-bound feet are often the cause of fatique, irritability and nervousness.



In Cantilevers the feet are free to act with the easy flexibility that Nature intends. Cantilevers are modelled after the natural lines of the feet and are flexible from toe to heel. Goodlooking lasts. Oxfords, strap-pumps and boots in fashionabl colors—leather or white canvas.

Widths from AAAAA to E. If there is not a nearby dealer in the list below write to the Toronto branch. Mail orders receive most careful attention.

Cantilever Shoe Shops

TORONTO—7½ Queen St. East.

MONTREAL—Keefer Bldg., St. Catherine St. W.
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WINNIPEG—Hudson's Bay Company.
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EDMONTON—Hudson's Bay Company.
CALGARY—Hudson's Bay Company.
VANCOUVER—Hudson's Bay Company.
VICTORIA—Hudson's Bay Company.

Regulations of Memorial Hospital at Oshawa

Rules and Regulations and Policies for the Government of the Staff in Accordance with the Standardization of Hospitals required by the American College of Surgeons.

1. STAFF.—The word Staff is here defined to be the group of physicians composed of the legally qualified practitioners of medicine and surgery residing in and practicing in the County of Ontario.

2. OFFICERS.—The officers of the Staff shall be a President, a Vice-President and a Secretary Treasurer. These with the addition of two elected councillors shall be the Executive Committee of the Staff.

The *President* shall preside at all meetings of the Staff and shall call all special meetings. He shall be ex-officio member of all committees.

The Vice-President, in the absence of the President, shall possess his powers, and perform his duties. When both President and Vice-President are absent, a temporary President or Chairman shall be elected by the Executive.

The Secretary-Treasurer shall keep a proper record of all the transactions of Staff Meetings, together with a record of the names of all members present. He shall transmit, whenever necessary, the proceedings wholly or in part of the Staff Meetings to the Superintendents of the Hospital or the Board of Directors. He shall notify all Officers of the Staff and members of Committees of their election, and all Conveners of their appointment, and shall send them the names of their Associates on the Committee, and the object for which the Committee has been appointed. He shall notify all members of each meeting of the Staff, at least two days before the appointed time, stating in the notices the nature of the business for which the meeting has been called.

The Executive Committee shall deal with emergencies when an Emergent Staff Meeting is considered unnecessary, and shall render advice in medical matters and matters of routine, whenever asked by the Superintendents, and they shall be expected to render such constructive criticism as their study of the work of the Hospital may warrant. It also shall comprise the advisory staff of the Oshawa General Hospital as required under the act for the "Control of Hospitals."

3. ÉLECTIONS.—The Officers shall be elected at the Annual Meeting of the Staff, and shall hold office until the next Annual Meeting, or until their successors have been elected.

Any vacancies which may occur shall be filled by an election at the first regular meeting of the Staff.

Elections shall be by nomination and ballot and the majority vote of those present shall be necessary for elections.

4. MEETINGS.—The Annual Meeting of the Staff shall take place in July of each year, on the First Tuesday of the month at 9 p.m.

The Monthly Meeting shall be held on the First Tuesday of each Month at 9 p.m., for the purpose of transacting general business, analyzing the clinical work of the Hospital, and reading papers bearing on the work.

Special Meetings shall be called by the President when he deems it advisable, or at the request of the

(Continued on page 23)



New York Post-Graduate Medical School and Hospital

A FAMOUS HOSPITAL WHERE DAVIS & GECK SUTURES
HAVE BEEN USED IN OVER 50,000 OPERATIONS
DURING THE LAST EIGHT YEARS

DAVIS & GECK INC. - 211 TO 221 DUFFIELD ST. - BROOKLYN, N.Y., U.S. A.

KALMERID CATGUT: BOILABLE AND NON-BOILABLE



It is not only sterile, but, being impregnated with potassium-mercuric-iodide,—
a double iodine compound,—it exerts a bactericidal action in the suture tract.
Two kinds of Kalmerid catgut are prepared: the boilable and the non-boilable. The boilable grade is flexible; the non-boilable is extremely flexible.

Plain Catgut	Boilable No. 120	5
10-Day Chromic	BoilableNo. 122	5
20-Day Chromic	Boilable No. 124	5
40-Day Chromic	Boilable No. 128	-

Plain Catgut.....Non-Boilable..No. 1405 10-Day Chromic..Non-Boilable..No. 1425 20-Day Chromic..Non-Boilable..No. 1445 40-Day Chromic..Non-Boilable..No. 1485

Sizes: 000.....00.....1....2....3....4

Each tube contains approximately sixty inches

In packages of twelve tubes of one kind and size



CLAUSTRO-THERMAL CATGUT



ized in cumol, after the tubes are sealed, at 165° centigrade—329° Fahrenheit. This of course assures absolute sterility.

Claustro-Thermal sutures are flexible and strong, of perfect absorbability, and in every way are compatible with the tissues. They are aseptic,—not germicidal.

The tubes may be boiled, or even may be autoclaved up to 30 pounds pressure.

		No.	
10-Day	Chromic	CatgutNo.	125
20-Day	Chromic	CatgutNo.	145
40-Day	Chromic	CatgutNo.	185

SIZES: 000...00...1...2...3...4

Each tube contains approximately sixty inches
In packages of twelve tubes of one kind and size

KANGAROO TENDONS



of value where postoperative tension is extreme or long continued apposition necessary, as in herniotomy and in tendon and bone

suturing. They are chromicized to resist absorption in fascia or in tendon for approximately thirty days.

Two kinds are prepared: the boilable and the non-boilable. The latter are extremely pliable.

Non-Bo	ilable GradeNo.	370
Boilable	GradeNo.	280

In packages of twelve tubes of one kind and size

PRICE: Per dozen tubes for all varieties listed above......\$2.40

A discount of 10 per cent is allowed on one gross or more, or \$25.92 net per gross

CARRIAGE PAID ANYWHERE IN THE WORLD

FOREIGN IMPORT DUTIES ARE EXTRA

DAVIS & GECK INC. ~ 2 I I TO 2 2 I DUFFIELD STREET ~ BROOKLYN, N. Y., U. S. A. Copyright April 1925 Davis & Geck Inc.

BEFAT	STERILIZED	- BOILABLE

No.	IN EACH TUBE	UNIFIED SIZES
350 Celluloid-Lines	60 Inches	000,00,0
	6 28-In. Sutur	
	Gut 6 14-In. Sutur	
400 Black Silkworm	Gut 6 14-In. Sutur	es00,0,1
450 White Twisted		
460Black Twisted		
480White Braided	Silk60 In	00,0,2,4
490Black Braided	Silk60 In	00, 1,4
In packages of tv	velve tubes of one kin	d and size

Per dozen tubes.....\$2.40 Or \$25.92 net per gross or more; carriage paid

FOR MINOR SURGERY

HEAT STERILIZED - BOILABLE

NO.	IN EACH TUBE	UNIFIED SIZES
802 Plain Kal	merid Catgut 20 In	00,0,1,2,3
81210-Day I	Kalmerid Catgut 20 In	00,0,1,2,3
82220-Day F	Kalmerid Catgut 20 In	00,0,1,2,3
862 Horsehair	2 28-In. Sut	ures00
872 White Silk	cwormGut2 14-In. Sut	ureso
882White Ty	wisted Silk20 In	000,0,2
In package	s of twelve tubes of one l	and size

Per dozen tubes.....\$1.20 Or \$12.96 net per gross or more; carriage paid

SUTURES WITH NEEDLES

EACH SUTURE THREADED UPON A UNIVERSAL NEEDLE

AS ILLUSTRATED, FOR GENE	RAL MINOR SURGE	RY
NO. IN EA	CH TUBE UNIF	IED SIZES
904Plain Kalmerid Catgut		
91410-Day Kalmerid Catgut	20 In00, 0,	1,2,3
92420-Day Kalmerid Catgut	20 In00, 0,	1,2,3
964Horsehair 2 28	8-In. Sutures	00
974 White Silkworm Gut 2 14	4-In. Sutures	0
984White Twisted Silk	.20 Ino	00,0,2



UNIVERSAL NEEDLE FOR SKIN, MUSCLE, OR TENDON

In packages of twelve tubes of one kind and size Per dozen tubes.....\$1.80 Or \$19.44 net per gross or more; carriage paid

CIRCUMCISION SUTURES

HEAT STERILIZED - BOILABLE



Each tube contains a 28-inch suture of Kalmerid plain catgut, size oo, threaded upon a small full-curved needle.

In packages of twelve tubes

No. 600. Per dozen tubes\$2.40 Or \$25.92 net per gross or more; carriage paid

NON-ABSORBABLE SUTURES OBSTETRICAL SUTURES

FOR IMMEDIATE REPAIR OF PERINEAL LACERATIONS



Kalmerid 40-day chromic catgut, size 3, threaded upon a large full-curved needle. Sterilized by heat after closure of the tubes. Boilable.

One tube in a package

No. 650. Per tube.....\$.25 Or \$32.40 net per gross or more; carriage paid

UMBILICAL TAPE

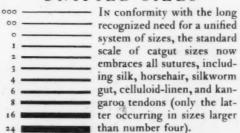
HEAT STERILIZED - BOILABLE



Each tube contains two 12-inch ligatures of a specially woven flat tape one-eighth inch wide impregnated with potassium-mercuric-iodide

In packages of twelve tubes No. 892. Per dozen tubes \$1.20 Or \$12.96 net per gross or more; carriage paid

UNIFIED SIZES



THE STANDARD PACKAGE



EACH PACKAGE CONTAINS TWELVE TUBES OF ONE KIND AND SIZE

DAVIS & GECK INC. - 211 TO 221 DUFFIELD STREET - BROOKLYN, N.Y., U.S. A. Printed in U.S.A. . The Private Press of Davis & Geck Inc.



Michelangelo At Work on His Masterpiece, the David

"Trifles make perfection, but perfection is no trifle"



Michelangelo's inspiring precept has always been the thought behind D&G Sutures

DAVIS & GECK INC. - 211 TO 221 DUFFIELD ST. - BROOKLYN, N.Y., U.S.A.

Regulations of Memorial Hospital

(Continued from page 18)

Superintendents of the Hospital, or any two members of the Staff.

Notice of regular or special meetings shall be posted in the Hospital and sent to the members of the Staff.

5. ORDER OF BUSINESS—At the regular meetings the order of business shall be as follows:—

(a) Reading of Minutes of the last meeting;

(b) Unfinished business;

(c) Communications;

(d) Report of Committees;

(e) New Business;

(f) Report and discussion of the work of the hospital;

(g) Special paper or subject for discussion;

(h) Adjournment.

6. AMENDMENTS—Amendments to these Regulations shall be made by giving notice at a regular meeting of the Staff, and such an Amendment shall not be considered or passed until the next regular meeting after that at which the notice was given.

7. FACILITIES FOR DIAGNOSIS AND TREATMENT—That Laboratory facilities be available for radiographic, fluroscopic, chemical, bacteriological and histological service for the diagnosis and

treatment of patients.

8. RECORDS—(a) The attending physician or surgeon or obstetrician shall be held responsible for a complete record of the patient for the Hospital files. This record shall include the personal history, previous illnesses, family history, physical examination, provisional diagnosis, laboratory findings, progress notes, medical and surgical treatment, condition on discharge, the final diagnosis, and, in case of death, the autopsy findings when available. The hospital is responsible for the clerical work in connection with this service.

(b) A complete history, physical examination, and working diagnosis shall be completed with 48 hours after admission, and, except in emergencies, shall be required prior to operation. Physicians are urged to send in copies of their office records in order to assist the Hospital in securing the necessary data.

(c) All records are the property of the Hospital and must not be taken away. The patient or physician may obtain copies or abstracts on request.

(d) All operations performed in the hospital shall be fully described. All tissues removed on operation shall be the property of the Hospital, and sent to the Laboratory for examination. Reports of this examination shall form a part of the patient's case record.

(e) Consultants shall write their findings and recommendations upon the patient's record.

Montreal

The raising of the Montreal Foundling and Baby Hospital, to the status of a recognized baby hospital, and the keeping of the hospital from debt by a collection of over \$20,000 were outstanding accomplishments of the year for that institution, it was stated, at the annual meeting held in the Ritz-Carlton Hotel. Mrs. Philip Mackenzie, honorary secretary, in her report also referred to the completion of a laundry in the hospital, and the installation of an elevator.

Announcing--

"K.O."

"The Knock-Out for Dirt"

After a great deal of experimenting we have developed a new cleanser which will be a boon to hospitals and institutions. It has been thoroughly tested and we can safely say that it is positively unequalled in efficiency and economy for cleaning floors, tiling, painted and enameled walls, painted wood-work, etc.

FREE SAMPLE

We are so confident you have never used anything to equal "K.O." that we would like to give you a generous sample absolutely free. Just send a post-card and we will forward it by return. "K'O." will save you money and do better work.

Another Money-Saver

Because it saves time and labor this mop-wringer pail saves money. It is specially made for heavy duty and is giving splendid satisfaction in many institutions and other large buildings. Made in 14-quart and 20-quart sizes.



It Will Pay You to Get Our Catalogue

It contains 164 illustrations and dozens of articles that will materially reduce cleaning and maintenance bills in all departments of your institution.

Soclean Limited

444 King Street West

Toronto

Problems of a New Hospital

Discussed By Ex-Mayor Harold Fisher, one of the Trustees of the Ottawa Civic Hospital

At a luncheon of the Rotary Club in the Chateau Laurier in February, ex-mayor Harold Fisher, K.C., M.L.A., dealt exhaustively into the affairs of the Ottawa Civic Hospital. In part Mr. Fisher said:

"After you have been on the job for a little while you realize that hospital management is a big and difficult business. It is something that no one can learn in a short time. If you are going to get results you must see to it that those on the commission are given time to learn the business and afterwards time to serve you when they become qualified. A poor commission is about the worst instrument for administration. We will get nowhere if good commissioners are to be turned out without reason, even if they are replaced by equally able men. It is for the citizens of Ottawa to see that an effort is made to keep this commission up to the standard that was set when the first commission was appointed.

"We have during the last two months had a great many difficulties. We moved into a new building. Those of you who have ever built a house know what you find when you move in. Notwithstanding all the thought and care you can give to the construction there are always things forgotten and things wrong. Multiply the size of your house by three or four hundred and you can imagine how many things there were that could go wrong in putting up this building. Notwithstanding, they have been comparatively few and they are being taken care of. A new organization had to be got together. A medical staff had to be selected. Nurses were taken over from different institutions. You can realize that it has been a task of very great difficulty.

TOO MUCH BUSINESS

"One thing that has troubled us is that we have been doing too much business. The three old hospitals had proper space according to regulations for 310 patients, although sometimes they were pressed to accommodate 350. We had on Saturday 392 patients

"We are told by the doctors that they are not unusually busy. The large number of patients in the Ottawa Civic Hospital can be accounted for in only one way. The hospital habit is growing. This hospital is so attractive that people are asking for admission who in former days would not have gone to a hospital, or would have gone to Montreal or some place else. Some of you perhaps heard a month or so ago that the hospital was full; that people had difficulty in obtaining accommodation. The hospital has never been full. The difficulty arose in this way: We thought that for some time, perhaps two or three years, we might be able to keep one floor closed, and in that way save a little money. We struggled along

with this floor closed for some time, and there was on occasions a shortage of accommodation. Finally we decided that we could do nothing else but open this storey.

"We have been short of pupil nurses. We took over all the nurses the other hospitals had. Others are being trained, but this cannot be done in a day. Further, it is only possible to train a certain number at any time. However, this situation will soon be remedied. In the meantime the people of Ottawa owe thanks to the present staff of nurses. They went at the task without any thought of sparing themselves, and we are coming through mighty well.

NURSES' TRAINING SCHOOL

"The board is resolved to spare no effort to provide the finest kind of nursing service. We think this is, perhaps, the most important feature in hospital work. We have a permanent graduate staff of 25. We believe that no better can be found anywhere. Under their supervision we have the pupil nurses-at present 140 in number. These girls work harder than any domestic servant. We pay them \$10 a month. In addition we undertake to teach them professional nursing. This we are resolved to do in the most thorough manner-for their own good, for the good of the hospital when they are with us, and for the good of the community after they leave us. We have some advantages that the smaller hospital has not. We have two instructresses who do nothing else but teach. The girls are to be given four months' intensive training before actually being put to work. This is in addition to the ordinary lectures given by the staff. We are able to give these young women comfortable living quarters in the Nurses Home. In the home we have a supervisor whose sole duty is to look after the girls. She is to be a mother to them. We are going to see to it that we have as fine a training school as is to be found in Canada. We hope to keep in Ottawa a lot of the girls who thought it necessary to go elsewhere for training.

RULES FOR BENEFIT OF PUBLIC.

"One of our problems is as to how to educate the public. This institution is owned by the people of Ottawa, and some of the people of Ottawa are apt to think that they should have privileges that would not be given in private institutions. What we have got to try to show the public is that rules and regulations are imposed and are necessary—not for the benefit of the hospital officials, but for the benefit of the people who are using the hospital, and the public generally. We have seen some little impatience

(Continued on page 28)

MAGIC BAKING POWDER

Ideal for the Diet Kitchens of Modern Hospitals

Magic Baking Powder is composed of Phosphate, Bicarbonate of Soda and Starch. No alum. Each ingredient is rigidly tested. Magic Baking Powder is uniform in quality and can be absolutely depended upon for uniformly good results in baking.

E. W. GILLETT CO. LTD.

TORONTO

WINNIPEG

MONTREAL



"TETRA"

CREPES BANDAGES AND COMPRESSES.

Adoptd by all the leading English and French Hospitals are the highest grade made and at the same time the cheapest in prices.

They are made of a special quadruple wool and cotton weaving and present numerous advantages in their applications.

They are the lightest and softest. Very absorbent and dry very quickly. They can be washed any number of times, even in boiling water.

Crepes Tetra				Compresses Tetra							
2	inches,	per	dozen,	\$ 2.75	2 x	2	inches,	per	100	pieces,	\$.35
21/		***	44	3.10	3 x	3	**	***	44	44	.55
3	**	4.4	4.6	3.55	4 x	4	50	4.6	4.6	**	.85
31/	5 "	* *	44	4.05	5 x	5	44	4.6	4.6	44	1.25
4	* **	4.6	4.6	5.25	6 x	6	44	4.6	**	**	1.75
5	4.6	**	44	6.35	8 x	8	44	4.6	44	66	3.85
6	44	6.6	44	7.55	10 x	10	4.4	4.4	4.4	4.6	5.05

Discounts of 10%, 15% and 20% on quantities.

There are also the CREPES OMEGA, made of all-wool or all-cotton, at still better prices for the cotton line and at little higher cost for the all wool.

Ample supply of samples on request to-

HERDT & CHARTON, INC.

MONTREAL: 55 McGill College Ave.

TORONTO: 50 East Wellington St.

News of Hospitals and Staffs

Condensed News of Hospital Activities from Coast to Coast

U XX []] XX []] XX [] XX []

Mission, B. C. Memorial Hospital Being Built

Hon. J. D. MacLean, in the presence of a large number of the citizens of Mission, Hatzic, Silverdale and surrounding country, laid the foundation stone of the Mission Memorial Hospital on Feb. 19th. The members of the Women's Institute of Hatzic came in for special mention, as having worked very hard during the past year for the hospital. Mrs. J. B. Lambarde, first secretary, and Mr. J. B. Millar, first president, were praised, with many others, for their work.

Orangeville, Ont.

Miss Dennison is Superintendent

At a special meeting of the Board of Management, of Lord Dufferin Hospital, Miss Mamie Dennison of Carleton Place was chosen as Superintendent and Matron of the institution. Miss E. M. Barclay, who has resigned, has been in charge here since the inception of the hospital twelve years ago. Miss Dennison, who is a graduate of the Hospital for Sick Children and the General Hospital, Toronto, entered upon her new duties on March 15th.

Montreal

Permit Issued to Royal Victoria

The Royal Victoria Hospital has been issued a building permit for the construction of a new maternity hospital in University street, St. Andrew's ward, with dimensions of 350 by 44 and nine storeys, estimated to cost \$931,193, it was learned at the city hall.

Hanna, Alta.

Presents an Enviable Report

The annual report of Hanna district municipal hospital No. 9, was submitted to the board at its last meeting. The report shows a cash balance of \$8,000 in the bank, and in addition there is to come the provincial grant of \$1,600 for the last half of the year. The total number of patients admitted during the year was 673, divided as follows: medical, 194; maternity, 98; babies, 95; surgical (accidents, etc.), 71; operations, 234; (139 minor, and 95 major). There were 18 deaths, four of which were infants.

Athabasca, Alta.

Out of Debt After 21/2 Years Operation

The Athabasca municipal hospital was entirely out of debt at the end of 1924, after two and one half years' operation. It showed a cash surplus above all indebtedness of \$678.09 at the end of December.

Patients treated in this hospital in 1924 were 223, distributed as follows: Maternity cases 35, no deaths; babies born, 30, with three deaths.

Toronto

To Equip Reception Hospital

The board of control decided on March 5th, to call for tenders for a refrigerating plant for the new reception hospital, the building of which has been completed but not yet equipped. The government will furnish the building.

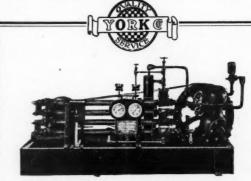
Montreal

Ste. Justine's Successful Year

Ste. Justine Hospital, for children, had an exceedingly busy year, according to the report of the medical superintendent presented at the annual meeting held on Feb. 27th. Dr. Artheme Dutilly, who presented the report, said that exactly 1,800 children were taken care of during the year 1924. There were 15,938 consultations given at the dispensary, and the analytical, electro-radiological and pathological anatomy laboratories worked efficiently and steadily.

The treasurer's report showed receipts of \$86,214.66 and expenditures of \$83,168.31, with a balance of \$3,670.91 on operations. The new building is looked

after in a separate account.



Most Canadian Hospitals using Mechanical Refrigeration

Have

"YORK" ICE MACHINES

"The Best Made"

Let us send you the names of those nearest you

Canadian Ice Machine Co., Ltd.

TORONTO

Montreal

Winnipeg

Vancouver

Victoria

Accepts Rate for Indigents

The Esquimalt Council at its regular monthly meeting was advised by the secretary of the Jubilee Hospital Board that the hospital will accept from the municipality a flat rate of \$100 per month in payment of the accounts of all indigent Esquimalt patients admitted to the institution during 1925. The Council adopted a resolution authorizing the payment in full of all outstanding accounts of indigent Esquimalt patients at the hospital previous to this year.

London

Twelve Nurses Enter St. Joseph's

A class of twelve has already entered the spring training course at St. Joseph's hospital. The class, which includes young women from all parts of the province, is as follows: Misses Elfrida Gaunt, Stratford; Isabel Anderson, Oil Springs; Florence Cannelly, Stratford; Marcella Crawford, Ingersoll; Marjorie Walsh, Schrieber; Ruby Falls, Belmont; Helen Turnbull, Delaware; Clara Kennedy, St. Marys; Ina Wilkey, London; Leona Peekham, Aylmer; Louise Nye, London, and Olive O'Neill, Woodstock.

Rossland, B.C. Sisters' Hospital Highly Praised

Dr. A. G. Lamb, inspector of hospitals, has just made an official visit to the Sisters' Hospital at Rossland, and has stated that it is one of the best equipped and most efficiently conducted institutions in the interior of the province and reflects great credit on a town the size of Rossland.

The financial statement of the hospital shows that the total receipts during 1924 amounted to \$17,413,-12 and the expenditure to \$17,320.62, showing a credit balance of \$92.50.

Montreal Alexandra Hospital Debt Free

After many years of struggle, the Alexandra Hospital is free of debt. Dr. A. D. Blackader, reported a clear financial sheet at the beginning of their new year.

Those present at the annual meeting all showed a spirit of optimism. The year 1924 it was stated, had been an exceedingly busy one at the hospital, while the increasing use of various sera had proved of great assistance in fighting diphtheria and other contagious diseases.

Emphasis was placed on the necessity in diphtheria cases of the prompt use of anti-toxin, as, when delayed, the toxin of the disease had already made recovery doubtful.

The following were elected to the board of governors for 1925:

Representing the Montreal General Hospital and Western Division; Farquhar Robertson, Robert Adair, C. E. Neill, A. D. Blackader, M.D., James Cleghorn, C. W. Lindsay and W. Grant Stewart, M.D.

Representing the Royal Victoria Hospital: Sir Vincent Meredith, Bart., Sir Charles Gordon, F. L. Wanklyn and Sir Herbert S. Holt.

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Walk-Over



There Was A Young Nurse Who Wore An Old Shoe---

But that was a long time ago. She wore an old shoe because she thought she couldn't find a new shoe that would be comfortable. Now she wears the Relief, the Walk-Over shoe with the extra-wide tread, the narrower than usual heel—a combination that makes it as comfortable as a prayer meeting and as smart as a bridge party.

It is made only by Walk-Over and sold only at the Walk-Over Store.

The Relief is sold in Oxfords, Slippers or Boots. Measuring charts sent on request.



Walk-Over

290 Yonge Street TORONTO

Problems of a New Hospital

(Continued from page 24)

about rules as to visiting patients. I have been in the hospital on a fine Sunday afternoon and seen the building so over-run with visitors that it was almost impossible for the staff to control them. A week ago I was present in the hospital when the assistant superintendent of nurses came into the office with a difficulty: 27 people in one group had come to visit a friend. Apparently some church society had met and they decided it would be a nice thing to go in a body to see the sick sister. Just what are you going to do with a case of that kind? I will give you what I believe to be the best opinion in regard to visiting. It is that when people are convalescent visitors may do some good. When people are sick, generally speaking, they are very much better without visitors, except, of course, those very near to them.

DELAY IN ADMITTING PATIENTS.

"In connection with every hospital that I ever heard of there has always been a complaint in regard to slowness in admitting patients. We are free to confess that we have not yet in the Ottawa Civic Hospital worked out the admitting problem in a satisfactory way. It could be made satisfactory if you spent enough money. How much money we are warranted in spending is a question.

"If you want to go into a private ward and trouble is taken to arrange by telephone in advance there need be no delay. Patients who want to avoid trouble should enter before four in the afternoon. Where arrangement is not made in advance, and particularly where admission to a public ward is sought, there is liable to be some delay. This delay is caused

by reason of the fact that at present we have not thought we could afford to keep a doctor constantly at an admiting room to attend to those who may come in. This would require at least two and perhaps three doctors who would do nothing else, and we have not up to the present thought we could afford this,

"It is necessary to show care in admitting cases for some reasons that will appeal to you: There is the danger of acutely infectious cases being admitted to wards with other cases. Even a case of measles may put a ward to a great deal of trouble. Care must be taken that chronic cases not requiring hospital treatment are not admitted. People wander into a hospital with very little wrong with them. Perhaps they have no home to which they can be returned. They remain as 'boarders' in the hospital. You cannot afford to run an old man's home or an old woman's home in a hospital.

WHO SHALL PAY FOR SICK?

"A tremendous question which I merely suggest for your discussion, and which goes to the root of things, is this: Who should pay the cost of the sick in a hospital? The patients in a hospital are made up of some who can pay and some who can not pay. There are several theories.

"It is held by some that the well people of the community should pay for the sick people. In our case this would mean that all the cost of the hospital should be borne by taxes. This theory, while it is startling to some people, does not horrify me at all. At present, however, the people of Ottawa, generally are not, I think, prepared to adopt this principle.

"Some contend that a hospital should be selfsupporting. In as much as some patients can pay (Continued on page 30)

Hospital Kitchen Equipment





Top of heavy cast iron polished plates, heating elements underneath slide into contact blocks at back. Oven of large capacity with pull out type elements—oven very easy to clean. Range also built with plate warmer base instead of oven; this combination found satisfactory in conjunction with sectional bake oven.

Food Conveyor

Truck fitted with six 8-quart aluminum containers well insulated with mineral wool packing. Top cover also packed. Base of truck has bottom and centre shelves. All trimmings nickel plated. Truck fitted with Colson wheels.



EXPERIENCE

We design and manufacture all varieties of Hospital Kitchen Equipment. Installation plans with expert observations and drawings are submitted to Architects and buyers without obligation. This is a small part of the complete service we are in a position to give when awarded contracts for complete installations. Our vast experience covering some of the largest installations from coast to coast enables us to give to each piece of equipment the benefit of a personnel conversant with every phase of hospital plans and specifications.

Our Hotel and Hospital Equipment Department is at your disposal at any time in rendering special expert service, and awaits the opportunity of communicating with you.

Enquiries, large or small, receive the same courteous and satisfactory attention.

Partial List of Institutions

Cafeteria of New Western
University.*
T. Eaton Co., Toronto, Ont.
Prince Edward Hotel,
Windsor, Ont.
National Club, Toronto, Ont.
Trinity College,
Port Hope, Ont.
Memorial Hospital,
St. Thomas, Ont.
Mental Hospital,
Essondale, B.C.
St. Mary s Hospital,
Kitchener, Ont.
C.P.R. Hotel,
Vancouver, B.C.
King Edward Hotel,
Toronto, Ont.

Westminster Hospital,
London, Ont.
Salvation Army Hospital,
Halifax, N.S.
St. Joseph Hospital,
London, Ont.
Wong's Cafe, London, Ont.
De Luxe Cafe, London, Ont.
Arcade Limited,
Hamilton, Ont.
Smallman & Ingram,
London, Ont.
Holeproof Hoslery,
London, Ont.
Penman's Ltd., London and
Paris, Ont., and Coaticook, Que.

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McClary's

Kitchen Equipment Department LONDON, ONTARIO

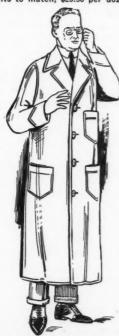
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HOUSE DOCTOR'S COAT

Made of bleached drill, this coat is neat and serviceable. It has the lay-down collar, three pockets, detachable buttons and pointed cuff on sleeve. Price for the coat, \$27.00 per dozen. Pants to match, \$25.50 per dozen.



Style No. 1700 SURGEON'S COAT



A popular coat for making "rounds," also for clinics and laboratory use. Made of best quality bleached duck, has convertible lapel collar, three pockets and side openings to permit access to inner pockets when coat is buttoned, point ed cuff on sleeves, detachable buttons. Length about 46 inches. Price \$45.00 per dozen.



Style No. 3200

NURSE'S OPERATING GOWN

Full-length gown with plain front, neat turn-over collar and full-length sleeves. Closes down back with tle tapes, and with long belt stitched on front to tie at back. Made of best quality Indian Head bleached. Can be furnished with knitted cuffs which fit closely and easily into the rubber gloves. Prices: Regular cuffs, \$24.00 per dozen; with knitted cuffs, \$25.50 per dozen.



Style No. 8500 BED GOWN

Standard length, 40 inches, opens down back with linen buttons; reinforced with yoke both front and back. Prices: Indian Head unbleached, \$15.00 per dozen; Indian Head bleached, \$17.50 per dozen.



ORDERLY'S COAT

Style No. 700

Made of good quality bleached duck, plain white or stripe, medium high collar, three pockets, 5 detachable buttachable but-tons, neat point-ed cuff on sleeve. Prices: Plain white, \$21.00 per dozen; striped, \$22.50 per dozen.



SURGEON'S OPERATING GOWN

Style No. 3700

Style No. 3700

A full length gown with plain front, standing collar and full-length sleeves, closes down the back with the tapes, and with long belt stitched on front to tie at back. Made of best quality indian Head bleached. Can be furnished with knitted cuffs which fit closely and easily into the rubber gloves. Prices: Regular cuffs, \$24.00 per dozen; with knitted cuffs, \$25.50 per dozen.

When ordering please refer your letter to Dept. A.

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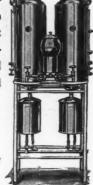
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Sold only by the Leading Supply Houses



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TORONTO

Problems of a New Hospital

(Continued from page 28)

nothing, the adoption of this principle would require some people to pay more than the cost of the services they get. This theory carried out really means that the sick people of the community who can afford to pay must pay for the sick people who can not afford to pay.

The present board has not gone into this matter from any academic point of view. We have temporarily adopted fees which on the whole are a little lower than those charged by the hospitals which have been superseded. The future will have to work out the general problem of charges. For myself I have this idea. Those who can afford to pay should pay what the services rendered actually cost. Those who can not pay should be taken care of by the community at large—that is, by taxes. Further, I think we ought to try to make it as easy as possible for those who want to pay their way. The present rates in the Ottawa Civic Hospital with certain exceptions are as follows: Private rooms, \$3.75 to \$7 per day; semi-private rooms, \$2.75 to \$3.25 per day; public wards, \$1.50 per day.

"In connection with these charges there is one thing that the public does not generally understand. Those in public wards who can do so pay \$1.50 a day and they are through with it. Those who are in semi-private or private wards provide their own doctor and pay for many things in addition to their room.

THE ACTUAL DIFFERENCE.

"Some time ago there came into my hands bills in connction with a woman who went to a hospital for an operation. She was a woman who had to earn her own living. She was in the hospital two days. This is what those two days cost::

Hospital services two days	\$12.00
Operating room	10.00
Medicine	
Extra dressings	.75
Laboratory services	3.00
Anaesthetist	25.00
Surgeon	100.00
Physician	10.00
Nurse two nights	10.00
Midnight lunch and breakfast for nurse	1.40
	-

Total \$180.95

"If that woman had been in a public ward she would have paid \$3.00

"I think some of us have a hope that we may be able to reduce the cost to those who want to pay their way. We are prevented by sacred laws from in any way interfering with the charges of a surgeon. We are endeavoring, however, to find a way of reducing charges for X-ray, anaesthetics and other similar services.

Guelph, Ont.

The Finance Committee of the Council has made provision for the payment of \$9,000 a year for five years to the General Hospital for the installation of a central heating plant in that institution to cost \$45,000. Provision is also made for the payment of \$1,500 a year for five years to St. Joseph's Hospital of that city.

Small Power Laundry Units Save Hospital Overhead

While the laundry work done by the custom steam laundry is usually very satisfactory (except in the case of Chinese laundries) there are certain very obvious disadvantages in sending out the Hospital linen, and if at all possible this work should be done in the institution itself.

When done inside, the linen can be looked after much more carefully and kept in better condition and it is usually found that a smaller supply of linen will suffice for the Hospital needs as it is always on hand inside the building.

The losses of linen are not so likely to occur as a much better check can be kept and in case a shortage does occur, the blame can immediately be fixed.

The laundering can usually be done in the institution at a great saving in cost, providing the right kind of equipment is used. This is especially the case in hospitals in country towns where the work has to be sent by express, as often the express charges will be almost equal to the laundry charges.

It should be carefully noted, however, that savings cannot be expected unless adequate and up-to-date equipment is used. The institution cannot expect to compete for its own work with the commercial laundry using the latest labor saving devices if it attempts to do its work by household methods with household equipment. To effect real economy, adequate power laundry machinery of modern design must be installed. The first cost of this will be somewhat higher but the opportunity to save will be greater.

Hospitals generally have realized these conditions and the larger institutions without exception operate their own plants, but the smaller ones, partly through lack of information on the subject, have not been so quick to recognize the opportunities offered. Another reason is that there has heretofore been very little equipment offered that was in between the large plant suitable for the big institution and the inadequate home-size equipment. There are now on the Canadian market small laundry units particularly adaptable to institutional work which it would well pay the hospital to investigate.

Various combinations and sizes of these self-contained laundry units are made to suit different conditions.

American Hospital Association Convention

Announcement has just been made that The 1925 Convention of the American Hospital Association will be held in Louisville, Ky., from October 19th to 23rd. The Convention proper will be in the Jefferson County Armory and The Brown Hotel, one of the largest in the South will be Convention Headquarters.

Catholic Hospital Association Convention

As in the last two years the Convention of the Catholic Hospital Association will be held at Spring Bank, Okauchee, Wisconsin. The dates for the year's Convention are June 22nd to June 27th, inclusive.



Increase Production by eliminating cooking, preparing, hand starching, second extraction and there by decrease production costs materially.

A Better Finish is given to coats, aprons, uniforms, caps, etc., and the original satinlike lustre is restored.

Don't Cook-Use Raw in the wheel while running the last rinse or blue water. Saves time, insures uniform stiffening and speeds up press production. No drying. No dampening. Extract and iron.

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We will send a 3-lb. bag of Satin Finishenough for a big load. Send for your sample to-day and try sizing with Satin Finish.

Satin Fininsh dissolves instantly in water, forming a perfect solution that easily penetrates the fabrics and imparts renewed strength.

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S. G. Barnstead Nursing Bottle Sterilizer



TO meet constantly increasing demands, we have perfected a Nursing Bottle Sterilizer which insures perfect sterilization and prevents breaking and chipping of bottles. Each bottle is hung over an individual steam tube.

M ADE for any number of bottles, heated by gas, steam or electricity.

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Sherbrooke Hospital to Build Extensive Additions

Plans are practically completed for extensive additions which are to be made to the St. Vincent de Paul Hospital, Sherbrooke, Que., and it is expected that the actual work will be begun in April next and be concluded in September, 1926. The approximate cost of these improvements will be in the vicinity of \$750,000. When completed St. Vincent de Paul Hospital will be made as modern as possible in every way, and it is understood that the building will be about three times its present size.

The contract for this work has been given to J. Alfred Dien, a contractor of that city, for \$410,000.

According to the plans drawn up by Mr. J. W. Gregoire, the architect, the construction will be subdivided into four parts. The south section will be situated south of the tower, or at the right of the main entrance. The other three sections will be known as the central part, the east section and the section reserved for the chapel.

The south section, which will measure 128 feet in length and 48 feet in width, will be five storeys high. This section will comprise a number of private rooms reserved for priests, also private rooms for men and women patients. A dispensary and a maternity ward will also be in this section, while the ground floor will be used for public rooms.

The central section will be about 120 feet wide, and will be a four storey building. The ground floor of this part of the hospital will be used for business rooms and also for patients' rooms and wound dressing rooms. The second storey will be reserved for men patients, while the top floor will be used by the Sisters and also another section for a laboratory.

The ground floor of the east section will be used for parlors, study halls, laundry and for apartments for the Sisters. The first floor will be reserved for boy patients and rooms for the nurses, while the girls' ward, nurses' rooms and the body part of the chapel will comprise the second floor. The third part will consist of the gallery of the chapel and the Sisters' apartments. The section comprising the chapel will consist of 72 feet by 48 feet.

The entire building will be fire-proof and will be made chiefly of concrete, while the interior part will be furnished in the most modern way possible.

The building will also be equipped with sun parlors and large open verandahs

The hospital lately received a grant of \$150,000 from the Provincial Government and it is understood that this amount will be used in connection with the extensive buildings operations.

Shriners Hospital in Montreal Formally Opened

The Montreal Unit of the Shriners' Hospitals for Crippled Children was formally opened on February 18th, by James R. Watt, Past Potentate of Cyprus Temple, Albany, N.Y., representing the National Board of Trustees, assisted by Clarence M. Dunbar, Imperial Assistant Rabban, also Nobles H. Caswell, F. Brown, and Dr. Hatt, of Springfield, Mass., the latter being the surgeon in chief of the Springfield

Unit, W. L. Sharp, Potentate of Palestine Temple, A. P. Ward and R. I. Durfee, of Palestine Temple, E. W. Jacocks, Aleppo Temple Boston, and C. Robinson, Recorder of Luxor Temple, St. John, N.B.

The key to the front door, to which was attached a gold plate, was presented to the architect, who in turn passed it to the contractor, and through the later to the Board of Governors, who in turn handed it to chairman of the Advisory Board, Clarence M. Dunbar next received it and gave it to James R. Watt. The latter stepped forward, placed the key in the lock, threw open the door and in the name of the National Board invited those present to enter. At this time the first patient was escorted through the ranks of the Nobles present, being carried on a stretcher by two members of Karnak Temple. He was placed in the elevator and taken to the ward where he was soon engaged in playing with toys which had been provided.

On entering the Hospital the visitors were met by Miss Dickson, head nurse, and her staff of nurses, also Dr. A. Mackenzie Forbes, chief surgeon of the hospital. Ill. Noble Bittues made the speech of welcome to the representatives of the National Board, his remarks being supplemented by Noble H. J. Elliott, chairman of the Board of Governors, and responses were made by Clarence M. Dunbar and J. R. Watt, after which an inspection of the hospital was made.

It is stated that there are ten applications for admissions, two patients already in the hospitals and four applications accepted.

The following comprises the board of governors of the Montreal unit: Noble H. J. Elliott, K.C., chairman; Ill. Noble Thomas S. Currie, vice-chairman; Ill. Noble Charles R. Tousaw, treasurer; Noble W. Maclaier, secretary; Noble W. W. Williamson, Noble Walter C. Hager, Noble J. W. C. Taylor, Ill. Noble T. Essery, Ill. Noble A. A. Bittues, chairman of advisory board; Dr. A. Mackenzie-Forbes, surgeonin-chief; Miss L. Dickson, head nurse.

> Goderich New Alexandra Hospital Opened

The formal opening of the new Alexandra Marine and General Hospital took place recently with much eclat. A great number of people took advantage of the invitation of the hospital board to visit and inspect the building, and the general expression was one of extreme pleasure with what they saw. Goderich now has a well-equipped modern hospital of twenty-five beds, the splendid culmination of many years of faith and hope and work-largely, it must in truth be said, on the part of the women of the community. "Community" in this case does not mean the town of Goderich merely, for great and valued assistance has come from the people of Colborne and Goderich townships and especially from the people of Ashfield, who have furnished three rooms in the new Goderich's old boys and girls, scattered hospital. over the continent, also have a substantial interest in the new hospital by reason of their contributions to the building fund and to the furnishing of the rooms.

If you require anything or wish to sell any used hospital equipment a classified advertisement in The Canadian Hospital may do it at small cost. See page 37.



"HYGIENIC"

Red Cross Enameled Ware

OUR OWN 14 POINTS

- -Solid Steel Base.
- -Finest Ingredients. -Each Article Four-Coated.
- Acid and Fire-Proof.
- Difficult to Chip.

- 10—Scientific and Attractive Shapes.

 11—Made by Experts of Lifetime Experience.

 12—Only Complete Line in Existence.

 13—In Every Hospital in the Country.

- 14-Fully Guaranteed.

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Ranges — Carving Tables — Tea and Coffee Urns—Dishwashers—Cutlery— Potato Parers.

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Gendron's Invalid Chairs

"The Standard for Years"

40 years' of experience in the making of Invalid Chairs has taught us how to manufacture chairs of the very highest grade in which are incorporated special features to be found in Gendrons exclusively.

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Gendron Manufacturing Co., Limited

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To the Dietitian—



The value of Junket in the sick room diet hardly needs emphasizing. Providing all the food value of milk, pre-coagulated for easier digestion, and in tasty form that patients enjoy, Junket deserves a regular place on your menus.

Send for our helpful recipe book.

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A Diploma Worth Framing

Thats the kind you want to give your graduating nurses and interns. It means the completion of a long and arduous labor—make it something worthy of what it represents. Our diplomas are of this sort.

Prices and samples free on request-by return mail

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Successors to

G. H. RAGSDALE & COMPANY

St. Boniface Hospital Given Dental Clinic

A dental clinic, the gift of the St. Boniface, Manitoba, Kiwanis club to the St. Boniface hospital, was inaugurated at a special luncheon held in the dining room of that institution on March 5th. The guests and members of the club inspected the clinic, which is of the most modern and improved type.

W. A. Underwood introduced Dr. Wilson A. Wier, who will have charge of the clinic. President F. T. Taylor called upon Mayor Swain and Ald. A. Mc-Fadyen to welcome the guests. Mayor Webb, in responding, gave a short address. Dr. James McKenty responded on behalf of the hospital, thanking the club for its generous gift. Dr. L. D. Collin and Dr. N. A. Laurendeau, also on the advisory board of the hospital, as well as being Kiwanians, spoke briefly on the merits of the club's undertaking. Dr. F. E. Warriner, president of the Dental association, spoke very highly of the fine equipment installed by the club, and prophesied future success of the clinic, under the direction of Dr. W. A. Weir.

Red Deer Hospital Operates on \$2.89½ Per Day

A cash balance in the bank with all expenses for the past year met including debenture payments, and the low operating cost for the year of \$2.89½ per patient day, was the splendid record made by the Red Deer, Alberta, Municipal hospital during 1924. This is one of the 15 municipal hospitals now being operated in Alberta under the Provincial government's municipal hospital scheme. The hospital has a total of 5050 patient days during the year, with 409 patients admitted and 136 major operations performed. Though there was an increase of 918 hospital days over the previous year, the hospital was able to finance all its obligations, including full debenture payments, and have a balance at the end of the year.

The low operating cost of \$2.89½ a day, is stated to be the lowest of any of the municipal hospitals of the province.

Watch Operations from Adjoining Room

A French surgeon attached to the St. Louis Hospital in Paris has invented a new device whereby medical students in an adjoining lecture-room may observe every detail of an operation without disturbing either the patient or the operator by their actual presence on the scene. An ingenious arrangement of lights and mirrors enables them to follow every movement of the operating surgeon, and for their convenience the whole picture is considerably enlarged. Moreover, a loud speaker carries to them the comments of the operating surgeon upon his work.

The new device, which has been named the episcope, is the invention of a young French physician, Dr. Thuillant. The St. Louis Hospital possesses the only one at present in use, but a second is being installed at the Ecole Dentaire.

Do you need competent help? If so advertise in the classified columns of The Canadian Hospital. See page 37.

The Type A-25 "MORSE" WAVE GENERATOR



RENDERS A DEFINITE SERVICE TO THE

MODERN HOSPITAL

Readily movable from room to room the "Morse" Wave Generator provides exercise to the patient unable to leave the bed.

Prevents or relieves constipation, prevents adhesions, restores tone to inert muscle tissue, softens and breaks up fibrosis, relieves pain.

We welcome your investigation

Write Us for Information

GENERAL X-RAY COMPANY

PARK SQUARE BLDG.

BOSTON, MASS.

\$67,000.00 "Over the Top"

Passaic General Hospital Raises Over Half-Million Dollars At Cost of Less than One and One-Half Per Cent.

On February 22nd the Passaic, N.J., General Hospital concluded a campaign under the direction of the Mary Frances Kern Organization for a Half-Million Dollars. A total of cash and pledges of \$566,680,45, or practically \$67,000 more than the fixed objective, was collected through the effort, again proving to the hospital world that Kern-Directed Campaions Secure the Maximum Results the field will yield regardless of the advertised goal. This foregoing total was made one day before the full period covered by the contract and with some further returns expected. Mrs. Mary Frances Kern.

1340 Congress Hotel, Chicago, Illinois.

My dear Mrs. Kern:

You will be pleased to know that we closed our public campaign for funds for the Passaic General Hospital last night successfully. I quote from my final remarks to the workers, as follows:

"Acknowledgement of the valued service and thorough cooperation of the MARY FRANCES KERN Organization, is cheerfully made by the Campaign Committee"

I am pleased to confirm this, and to say that our relations with your organization, from the beginning, have been pleasant and satisfactory.

With best wishes, I am, very truly yours,

RICHARD J. Scoles, President of Board.



Mary Frances Kern

CAN HOSPITAL ASSOCIATION

MARY FRANCES KERN is especially well fitted by experience to conduct hospital campaigns. For many years she was an executive in large Eastern hospitals, and she is intimately acquainted with the modern hospital's problems from all angles.

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This is how the Kellogg Company aids in building up the health of the nation:

(a) Only the very finest, richest grains are bought for use in the manufacturing of the Kellogg Corn Flakes, ALL-BRAN, Krumbles and Pep. These grains are always carefully sorted, all but the best quality being rejected.

(b) The actual manufacture is carried on under the most sanitary conditions. From the first step to the last no hands touch the grains. Every process is carried out by machinery.

(c) The waxtite wrapper on each carton insures cleanliness and keeps the cereals fresh and crisp. Doctors, nurses, public health workers, teachers and home-makers all feel safe in using and recommending Kellogg's cereals.

Kellogg Cereal Service

To doctors and nurses—diet pads and pamphlets dealing with proper food in conditions of overweight, underweight, anemia and constipation.

To teachers and dietitians—food selection charts, exhibit material and health suggestions.

To home-makers—recipes, menu suggestions and meal planning charts.

If you wish this service, fill out the coupon.

RELIEVES CONSTIPATION Kollvygs A11-RRAN	KELLOGG COMPANY Home Economics Department London, Ontario, Canada Please send me the pamphlets for— Doctors and Nurses Teachers and Dietitians Home Makers	C.H. 4.
COOKED-KRUMBLED READY TO EAT **M. Malleys* KELLOGG COMPANY BUILT CHILL MICH. LUMBANG. LUMBANG.	Morga's to	ook for his signatu K.K.Kellog

the original ALL-BRAN-ready-to-eat

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POSITIONS—Positions secured for superintendent of nurses, graduate nurses, technicians, dietitians and anesthetists, any place in the United States or Canada. If you are not satisfied or are looking for a position elsewhere write us for particulars. Eastern Registry for Nurses, Hartford, Conn.

WANTED—Accredited graduate nurses, dietitians and technicians; positions available in every section of the country; each applicant given individual attention; send for registration form. Medical Bureau, Marshall Field

WANTED—(a) Two competent supervisors; surgical and maternity departments approved hospital. (b) Two general night duty nurses; eastern city. (c) Combined anaesthetist and surgical supervisor; attractive offer. (d) General day duty nurse; middle west; \$90, maintenance. Medical Bureau, Marshall Field Annex, Chicago.

Positions Wanted.

WANTED—Situation for accredited graduate nurses, technicians and dietitians; candidates available for every kind of position—from general duty nurse to hospital executive; references investigated always; services gratis to employers. Medical Bureau, Marshall Field Annex, Chicago.

Schools of Instruction.

NEW YORK POST-GRADUATE MEDICAL SCHOOL AND HOSPITAL

—A course in medical social service has recently been added to our curriculum which consists of seven subjects in conjunction with practical work.

Applications will be received from graduate nurses or students who have
no less than two years at an approved medical college.

Communications should be addressed to the Deam—308 E. 20th St., New

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Estimates for Provincial Institutions

Supplementary estimates for the present year, totaling \$2,187, 592, were tabled in the Ontario legislature on March 5th. Of this year's total the public works account is for \$1,528,000, which includes \$400,-000 for the new east block in Queen's Park.

Votes for provincial institutions include \$40,000 for additions and alterations to the boiler house and plant at the Ontario Hospital, London; a revote of \$120,000 for new buildings to accommodate 200 patients at the Ontario Hospital, Woodstock, and various sums for new jails in Haileybury, Port Arthur and Nipissing. A grant of \$50,000 is made to the Mountain Sanatorium at Hamilton for building purposes, conditional upon an equipment fund also being raised and an arrangement that patients be admitted from any part of the province.

New Book on Planning of Small Hospitals

To meet what is conceded to be "a dire need, the federal department of health has issued a book of 100 pages on the "Planning of Small Community Hospitals."

Hospital authorities estimate that there should be five to seven hospital beds to every thousand of population, though in Canada in 1923 there was but one bed to every 347 of population. "Fifty-six per cent. of the population live in rural districts," according to the introduction of the book, "and many are located at a distance from hospital service, making it costly and detrimental to acute physical conditions to transport the patient to large hospital centres. The question therefore of distribution of hospitals throughout rural districts is one of moment and urgency.

The publication is, it is stated, in reponse to Dominion wide inquiries made to the department for guildance in the undertaking of community hospitals, and it is the intention of the department to distribute the information to every municipality in Canada as well as to public libraries, architects and women's organizations.

The book deals exhaustively with the details of the site, design, erection and equipment of the small hospital, giving photographs of Canadian rural hospitals and architects drawing of ideal buildings. In all there are 82 illustrations together with specific instructions as to each step to be taken as the building progresses. The book was prepared by B. Evan Parry, supervising architect for the federal department of health.

X-Ray Expert Loses His Eighth Finger

Dr. Frederick Henry Baejter, noted pioneer in the development of the X-Ray, is again in Johns Hopkins Hospital, preparing to lose his eighth finger as a sacrifice in the cause of suffering humanity.

Injuries years ago in his experiments have necessitated the removal one by one of all the fingers on his right hand and three on his left. He has undergone seventy operations, having yielded to the surgeon's knife more often than any other physician or probably any other person on this continent. Frequently new skin has been grafted upon his ray-burned flesh.

If you have any equipment you wish to dispose of, try a classified advertisement in The Canadian Hospital. See page 37.

The Advertisements

The Publishers accept the announcements of reputable houses and reliable products only.

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Dr. W. L. Ritchie Goes to Montreal General

Dr. W. L Ritchie, who has been in charge of the X-Ray Department of the Ottawa Civic Hospital, has accepted a similar appointment at the Montreal General Hospital.

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